

10/009447

APPLICATION DATA SHEET**Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit:: 1614  
CD-ROM or CD-R?: None  
Title:: SUBSTITUTED POLYCYCLIC ARYL AND  
HETEROARYL PYRIMIDINONES USEFUL  
FOR ANTICOAGULANTS  
Attorney Docket Number:: PHA 4159.26  
Request for Early Publication?: No  
Request for Non-Publication?: No  
Small Entity?: No  
Secrecy Order in Parent?: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name:: S.  
Family Name:: South  
City of Residence:: St. Louis  
State or Province of Residence:: MO  
Country of Residence:: US  
Street of Mailing Address:: 11671 Chieftain Drive  
City of Mailing Address:: St. Louis  
State or Province of Mailing  
Address:: MO  
Postal Code of Mailing Address:: 63146

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Ashton  
Middle Name:: T.  
Family Name:: Hamme  
Name Suffix:: II  
City of Residence:: St. Louis  
State or Province of Residence:: MO  
Country of Residence:: US  
Street of Mailing Address:: 1501 B Oak Forest Parkway Ct.  
City of Mailing Address:: St. Louis  
State or Province of Mailing  
Address:: MO  
Postal Code of Mailing Address:: 63146

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: William  
Middle Name:: L.  
Family Name:: Neumann  
City of Residence:: St. Louis  
State or Province of Residence:: MO  
Country of Residence:: US  
Street of Mailing Address:: 212 West Monroe  
City of Mailing Address:: St. Louis  
State or Province of Mailing  
Address:: MO  
Postal Code of Mailing Address:: 63122

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Darin  
Middle Name:: E.  
Family Name:: Jones  
City of Residence:: Ballwin  
State or Province of Residence:: MO  
Country of Residence:: US  
Street of Mailing Address:: 408 Johanna Place  
City of Mailing Address:: Ballwin  
State or Province of Mailing  
Address:: MO  
Postal Code of Mailing Address:: 63021

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Melvin  
Middle Name:: L.  
Family Name:: Rueppel  
City of Residence:: St. Louis  
State or Province of Residence:: MO  
Country of Residence:: US  
Street of Mailing Address:: 1904 Grassy Ridge Road  
City of Mailing Address:: St. Louis  
State or Province of Mailing  
Address:: MO  
Postal Code of Mailing Address:: 63122  
**Correspondence Information**  
Correspondence Customer Number:: 000321

**Representative Information**

Representative Customer Number:: 000321

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/US00/09806	05/17/00
PCT/US00/09806	Non- Provisional of	60/134,794	05/19/99

**Assignee Information**

Assignee Name:: Pharmacia Corporation